

VIA FEDERAL EXPRESS AND EMAIL

Mr. Michael Constantino
Project Review Supervisor
Illinois Health Facilities & Services Review Board
535 West Jefferson Street
Springfield, IL 62701-0001

RECEIVED

MAR 3 0 2018

HEALTH FACILITIES & SERVICES REVIEW BOARD

Re: Final Certificate of Completion for Project #16-021 Silver Cross Ambulatory Surgery Center (the "Project")

Dear Mr. Constantino:

Pursuant to 77 Ill. Admin. Code § 1130.770(c), on behalf of Silver Cross Health System and Silver Cross Hospital & Medical Centers (collectively, the "Permit Holders"), I hereby certify the following:

- 1. The Permit Holders spent \$10,588,201.00 to complete the Project which was less than the approved permit amount of \$11,091,426.00. See Exhibit A, attached hereto, for a detailed itemization of the Project's costs and sources of funds.
- 2. The Permit Holders have not submitted any Project costs, expenses, or expenditures for reimbursement under Title XVIII or XIX of the Social Security Act.
- 3. The Permit Holders will not be submitting any Project costs, expenses, or expenditures for reimbursement under Title XVIII or XIX of the Social Security Act.
- 4. The Permit Holders have complied with all of the terms of the Permit issued for the Project, including, project costs, square footage, services, and other items contemplated by Section 1130.770(c)(4).
- 5. The Permit Holders were provided the attached G702 Application and Certificate of Payment from its General Contractor for the Project. See Exhibit B, attached hereto.

If you have any questions or need any additional information, please feel free to contact me.

Sincerely,

Geoffre Tryon

Vice President, Operations

Subscribed and Sworn Before me this <u>27</u> day of March, 2018

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"OFFICIAL SEAL" CAROL J. ZIER

NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES JUNE 17, 2019

cc:

Ruth Colby, Silver Cross Hospital & Medical Centers Geoff Tryon, Silver Cross Hospital & Medical Centers Mariel Yekich, Silver Cross Hospital & Medical Centers

Edward J. Green, Esq. Foley & Lardner LLP

EXHIBIT A FINAL REALIZED COSTS PROJECT NO. 16-021 SILVER CROSS AMBULATORY SURGERY CENTER

	Approved CON Permit Amount	Total (Project) Costs?
Preplanning Costs		
Site Survey and Soil Investigation	\$10,000.00	\$ 36,982
Site Preparation	\$1,200,000.00	\$1,053,532
Off Site Work	\$ 0.00	
New Construction Contracts	\$5,553,449.00	\$5,873,297
Modernization Contracts	\$0.00	
Contingencies	\$555,344.00	\$12,217
Architectural / Engineering Fees	\$547,521.00	\$372,509
Consulting and Other Fees	\$383,022.00	\$122,354
Moveable or Other Equipment	\$2,842,090.00	\$3,117,310
Fair Market Value of Leased Equipment	\$0.00	
Bond Issuance Expense	\$0.00	
,Net Interest Expense During Construction	\$0.00	
Fair Market Value of Leased Space	\$0.00	
Other Costs to be Capitalized	\$0.00	
Acquisition of Building or Other Property (excl land)	\$0.00	
ESTIMATED TOTAL PROJECT COST	\$11,091,426.00	\$10,588,201

EXHIBIT B G702 APPLICATION AND CERTIFICATE OF PERMIT PROJECT #16-021 SILVER CROSS AMBULATORY SURGERY CENTER

APPLICATION AND CERTIFIC	ATION FOR PAYMENT	ALA DOCUMENT G702 NAGE1 OF 1			
To Owner.	肚	APPLICATION#: 01 Distribution to:			
liver Cruss Hospital	Silver Cross Hospital	X OWNER			
800 Silver Cross Blvd	Outpatient Surgery Canter	PENIOD TO: 06/30/17			
low Luncos, IT, 60451	1003 Pavelak Parkway	X_ARCHITECT			
	New Lancz, N. 60451	PROJECT #: GROZO			
ina Contractor:	ARCHITECT:	X CONTRACTOR			
sed Construction	The Burell Group, PC	CONTRACT DATE: 11/28/16			
00 W. Jackson, 8th Floor	500 Cehaha Park Orde, St 111	PURCHASE ORDER: 0329701			
Niceso, Ulinois 60661	Birmingham, Al. 95242				
ONTRACT FOR: Outpatient Surp	ery Cir Renovation				
CONTRACTOR'S APPLICATE	ON FOR PAYMENT	The underlying Continuous cardilles that to the best of the Contractor's Incovinsign, information			
polication is made for payment, as shows		and helpf the Work covered by this Application for Proposes has been completed in accordance			
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		fights of the Owner of Contractor under this Contract.			